

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED  
Aug 26 1998 8:00am  
Secretary of State

|   |   |  |
|---|---|--|
| <b>NONPROFIT CORPORATION ANNUAL REPORT 1998</b> |  | <b>FLORIDA DEPARTMENT OF STATE</b><br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|---|---|--|

DOCUMENT # 758829

(6)

1. Corporation Name

MOUNT OLIVE AFRICAN METHODIST EPISCOPAL CHURCH,  
OF GAINESVILLE, FLORIDA, INC.

Principal Place of Business

Mailing Address

721 S.E. 8TH STREET  
GAINESVILLE FL 32601

721 S.E. 8TH STREET  
GAINESVILLE FL 32601

3. Date Incorporated or Qualified  
06/18/1981

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

SIMMONS, OLIVER  
721 S.E. 8TH STREET  
GAINESVILLE FL 32601

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and (if applicable,

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME SIMMONS, OLIVER  
STREET ADDRESS 721 S.E. 8TH STREET  
CITY-ST-ZIP GAINESVILLE FL

TITLE D ☒ DELETE

NAME TUCKER, CAROLYN M  
STREET ADDRESS 5210 N.W. 24TH PLACE  
CITY-ST-ZIP GAINESVILLE FL 32606

TITLE D ☐ DELETE

NAME MINGO, GWENUEL W  
STREET ADDRESS 721 S.E. 8TH STREET  
CITY-ST-ZIP GAINESVILLE FL

TITLE D ☐ DELETE

NAME STOVER, OTIS D  
STREET ADDRESS 1808 S.E. 28TH PLACE  
CITY-ST-ZIP GAINESVILLE FL 32601

TITLE D ☐ DELETE

NAME JONES, ORIAN V  
STREET ADDRESS 5834 N.E. 39TH BLVD.  
CITY-ST-ZIP GAINESVILLE FL 32609

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13. If changed, or an attachment with an address.

SIGNATURE:

Oliver Simmons Oliver Simmons 8/3/98 850 906 9914

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/98)